

County of San Diego Health and Human Services Agency (HHS)A Mental Health Services Policies and Procedures MHS General Administration					
Subject:	<b>SECURE FACILITY – LONG TERM CARE (SF/LTC)</b>			No:	<b>01-02-210</b> Formerly 01-01-104
Reference:	<b>Title 9</b>			Page:	<b>1</b> of <b>12</b>

**PURPOSE:**

To provide a process for ensuring that clients with serious and persistent mental illness receive services in the least restrictive environment possible. Secure facilities, for example, Institutions for the Mental Diseases (IMD), are to be used as an integrated part of the patient's overall care plan aimed at improving adaptive functioning toward eventual residence in the community and involvement with community-based treatment.

**BACKGROUND:**

In 1991, the State of California transferred to the counties almost total control of the funding designated for the care of seriously mentally ill persons. The counties, over the next several years, moved patients from the state hospitals back to placements closer to their home areas, as they expanded mental health services overall. While many of the persons that were discharged from state hospitals were able to live relatively successfully in the community, with varying levels of support and treatment, there remains a group of gravely disabled people who require treatment in secure and locked long-term care facilities.

United Behavioral Health (UBH) provides Utilization Management for Adult/Older Adult Mental Health Services (A/OAMHS) County-funded locked/secure facility beds.

**POLICY:**

San Diego County residents who have a serious, persistent Axis I diagnosed mental illness, who meet the guidelines for the target population, and who are referred for admission to a Secure Facility/Long-Term Care (SF/LTC) program, shall meet criteria for eligibility. There shall be a specific referral process in place, which shall include a review by the UBH Long-Term Care Coordinator and the UBH Medical Director who shall determine whether admission criteria are met. The Secure Facility/Long-Term Care Placement Committee shall determine which facility has the most appropriate program for each client.

Clients admitted to SF/LTC shall have an individualized treatment plan, treatment goals, and a plan for discharge to a less restrictive level of care.

Facilities shall submit scheduled reports on client progress and shall be granted continued authorization, when appropriate. Clients with escalating psychiatric symptoms resulting in a brief stay in an acute psychiatric hospital or who develop serious medical needs resulting in a brief stay in a medical hospital shall have their SF/LTC beds held for up to seven days.

**DEFINITIONS:**

Approved date:	Approved	Alfredo Aguirre's Signature on File
November 20, 2006		Director, Mental Health Services/Designee

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Ancillary Services: Services that are not covered in the daily bed rate paid to a facility and are billed to another source, for example: psychiatrist, medical doctor, psychologist time and medications.

County LTC manager: the A/OAMHS staff person designated by the Mental Health director to provide long-term care utilization management and coordination.

“Criteria for Admission” and “Criteria for Continued Care”: lists that specify the eligibility parameters for a level of care.

Gravely Disabled: defined in the Welfare and Institutions Code 5008, Section (h)(1)(A)... “a condition in which a person, as a result of a mental disorder, is unable to provide for his or her basic needs for food, clothing, or shelter.”

Institutions for the Mental Diseases (IMD): a 24 hour institution of more than 16 beds that is primarily engaged in providing diagnosis, treatment or care of persons with mental disorders.

Locked/secure facilities: County-funded institutions that provide intensive psychiatric stabilization and rehabilitation includes IMDs and MHRCs.

Mental Health Rehabilitation Centers (MHRC): a 24 hour program licensed by the Department of Mental Health which provides intensive support and rehabilitation services designed to assist persons, 18 years and older with mental disorders, to develop skills to become self sufficient and capable of increasing levels of independence and functioning.

Secure Facility/Long-Term Care Placement Committee: group (composed of representatives from San Diego County A/OAMHS, UBH, and local IMD/MHRC facilities) that determines which of the various programs can best meet the needs of the eligible individual.

Utilization Management: the process of authorizing admission, continued care, and payment for services utilizing specified criteria.

### **TARGET POPULATION:**

Locked/secure facilities serve those residents of San Diego who are not entitled to services through other system either public or private who are hospitalized with an acute psychiatric episode. They are experiencing serious psychiatric disabilities and require a secure (often locked), safe, and structured living environment upon discharge from the hospital. The persons served should have the potential to benefit functionally from psychiatric rehabilitation services and have the capacity to progress to a less restrictive level of care. The individual must have an Axis I psychiatric diagnosis (as the primary diagnosis) and meet the Medi-Cal criteria for psychiatric inpatient services at the time of application to UBH for consideration of placement in SF/LTC. The person will have been found gravely disabled by Superior Court and will have a temporary or permanent LPS Conservator. The age range is from eighteen (18) through sixty-four (64) years, although persons sixty-five (65) and older may be admitted to treatment programs as an exception, if it is determined they can benefit from the program.

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**PROCEDURE (S):**

**I. ELIGIBILITY CRITERIA TO COUNTY FUNDED BEDS**

**A. In-County and Out-Of-County IMD/MHRC**

The individual must meet all of the following criteria:

1. be a resident of San Diego County as determined by having San Diego Medi-Cal as his/her primary insurance
2. is eligible for SSI and Medi-Cal.
  - a) has verified SSI to fund room and board services while at SF/LTC. Individual must have payee who consents to payment for the services
  - b) if indigent, must be referred by San Diego County Psychiatric Hospital and the SSI/Medi-Cal application must be verified prior to referral. Only a limited number of indigent beds are available.
  - c) has verified funding for ancillary services.
3. is eighteen (18) through sixty-four (64) years old. If an individual is between his/her eighteen (18) and twenty-first (21) birthday he/she must also have been offered or considered for services by Therapeutic Behavior Services (TBS). A TBS Certification form shall be completed.
4. is not entitled to comparable services through other systems (i.e., Veterans Administration (VA), Regional Center, private insurance, penal corrections).
5. must meet medical necessity criteria for psychiatric inpatient services at time of referral.
6. can not be maintained at a less restrictive level of care.
7. must have an adequately documented Title 9 Axis I diagnosis of a serious, persistent, major, non-substance abuse related mental disorder. The symptoms must not be primarily a manifestation of mental retardation or other developmental disorder. Clients may also have a concurrent diagnosis on Axis II or have a substance abuse diagnosis as a concurrent Axis I diagnosis. An Axis II diagnosis alone is not sufficient to meet criteria.
8. must have the potential to benefit from an intensive psychosocial rehabilitation treatment program and the potential to progress to a less restrictive level of care.
9. must be gravely disabled as determined by the establishment of a temporary or permanent public or private Lanterman-Petris-Short (LPS) Conservatorship by Superior Court.

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10. is medically appropriate as determined by applicable IMD and MHRC regulations. The management of medical conditions must be within the scope of practice of IMD staff requirements. Physical healthcare conditions that require ongoing treatment or monitoring beyond medication and laboratory tests that are routinely done at IMDs, are normally not accepted and are referred back to the hospital for placement in a skilled nursing facility.
11. must have a tuberculosis (TB) clearance within thirty days of application.
12. is on a stable, clinically appropriate medication regimen.
13. has absence of chronic or recurrent dangerousness to self or others. This includes absence of chronic or recurrent episodes of assaultive behavior.

**B. VISTA KNOLL**

San Diego County has a contract with Vista Knoll, a Skilled Nursing Facility in North County, for beds in the specialized Neurobehavioral Health Unit for residents with Traumatic Brain Injuries (TBI). The individual:

1. must meet all 13 criteria for eligibility to County funded SF/LTC facilities.
2. must have a documented Axis I diagnosis of a serious, persistent, major, non-substance abuse related mental disorder as stated in Title 9, with documented evidence it existed prior to the TBI.

**C. STATE PSYCHIATRIC HOSPITAL**

1. Individual must meet all of the eligibility criteria for SF/LTC, with the exception of #13 above.
2. Individual must be a current or recurrent danger to self or others, which includes chronic or recurrent episodes of assaultive or suicidal behavior. Documentation must show that assaultive behavior is a result of psychosis that has been resistant to treatment rather than antisocial behavior, dementia or TBI.
3. Individual can not be admitted or maintained at an IMD/MHRC.
4. Admissions to State Hospitals shall be approved by the County LTC manager.
5. Individual shall be on LPS Permanent Conservatorship. The LPS Conservator must authorize A/OAMHS to provide case management services in order to monitor the individual's placement and progress.

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II. REFERRAL PROCESS

A. Referring agencies shall submit an information packet to the UBH Long-Term Care Coordinator. The packet shall include the following:

1. SF/LTC Referral Form (see Attachment) with attending psychiatrist's order for SF/LTC attached.
2. Hospital Face Sheet
3. Proof of current Medi-Cal coverage (an Automated Eligibility Verification System [AEVS] strip from the hospital business office) or alternative funding for all ancillary services
4. Proof of current SSI and "Notice to Representative Payee" (See Attachment) signed by payee.
5. TBS certification form if 18 through 21 years of age.
6. Most recent Court Investigation Report for San Diego County LPS Conservatorship
7. Complete Psychiatric Assessment from current hospitalization including psychiatric history, substance abuse history and history of self destructive or assaultive behavior. If individual has been hospitalized more than thirty days, this information must be updated with course of treatment and current acuity.
8. Physical and Medical History from current hospitalization. If individual has been hospitalized more than thirty days, this information must be updated with course of treatment and current acuity.
9. Medications from current hospitalizations including Medication Administration Record showing medication compliance and information on medication changes.
10. Nursing Assessment from current hospitalization
11. Social Work Assessment and Notes from current hospitalization
12. One week of progress notes including nursing, group, and medical doctor (MD)
13. Mini Mental Status Exam completed within seven days of referral for SF/LTC.
14. Lab reports from current hospitalization.
15. Results of purified protein derivative (PPD) (tuberculosis [TB] test) or chest x-ray from current hospitalization
16. Written recommendation from the case manager.

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- B. The referral shall not be processed until all of the information is provided.
- C. The UBH Long-Term Care Coordinator and the UBH Medical Director review referrals for completeness of information and determine eligibility for admission.
  - 1. The County LTC manager shall be available for consultation.
  - 2. Additional information not listed above may be requested in order to make a determination of eligibility.
  - 3. In the rare case, an independent on-site evaluation of the referred individual may be completed by UBH or County staff.
- D. If eligibility criteria for SF/LTC is met the SF/LTC Placement Committee reviews the information in order to determine the most appropriate SF/LTC facility for client.
- E. If eligibility criteria for SF/LTC is not met UBH issues a Letter of Determination (LOD) that notes why the client is not eligible and provides information on the review process. UBH also issues a letter to the client stating that he/she has been referred for SF/LTC placement and to contact his/her doctor or conservator for information on the review. (See Attachments)

### III. REVIEWS OF DETERMINATION DECISIONS

- A. When the referring doctor, conservator or client does not agree with the decision regarding eligibility for SF/LTC, he/she may request a review of the decision by notifying the San Diego County LTC manager in writing within three business days. A copy of the request shall also be sent to the UBH LTC Coordinator. This request for review shall include submission of the following information:
  - 1. New detailed specific information as to why the individual meets the eligibility criteria for SF/LTC.
  - 2. Supportive documentation as relevant.
- B. The San Diego County A/OAMHS Director or his/her designee
  - 1. reviews the information upon which UBH made their original determination of denial
  - 2. reviews UBH's documentation or "clinical notes" supporting that decision
  - 3. reviews new information provided by the parties requesting the review.
  - 4. may speak with involved parties and request additional information.
  - 5. may request a psychiatric evaluation (usually completed by A/OAMHS Forensic Psychiatry)

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- C. After review of the documentation, the San Diego County A/OAMHS Director or designee shall render the final determination regarding eligibility.
- D. The A/OAMHS Director or designee informs the County LTC manager of the decision by e-mail. The County LTC manager then informs the UBH LTC Coordinator.
  - 1. When the reviewer supports the decision that the individual does not meet eligibility criteria for SF/LTC, he/she sends a letter to inform the treating psychiatrist of the decision.
  - 2. When the reviewer decides the eligibility criteria is met, the UBH LTC Coordinator informs the hospital of the decision and works with the County LTC manager and the SF/LTC facilities to identify appropriate SF/LTC placement.

#### IV. PLACEMENT

- A. Information about clients who meet eligibility criteria for SF/LTC services is presented twice monthly to the SF/LTC Placement Committee to determine optimal placement. Facilities that have bed openings between the scheduled meetings, may notify the UBH LTC Coordinator who will forward appropriate referrals if available. The UBH LTC Coordinator is responsible for notifying the referral agency as to the outcome after the placement decision. The committee shall include, but not be limited to:
  - 1. County LTC manager
  - 2. UBH Medical Director
  - 3. UBH LTC Coordinator
  - 4. Representatives from each of the San Diego County contracted IMDs
  - 5. Representative from the Public Conservator's Office
- B. Out-of-County
  - 1. Individual meets all criteria for In-County placement.
  - 2. Individual has been refused placement by the In-County facilities, or there are compelling clinical reasons established that the individual would benefit from Out-of-County placement.
  - 3. Admissions to Out-of-County SF/LTC placement shall be approved by the County LTC manager after verification that funding is available.
  - 4. Individual shall be on LPS Permanent Conservatorship prior to admission. The LPS Conservator must authorize A/OAMHS to provide case management services in order for the County to be able to monitor the individual's placement and progress.

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**C. Placement in a State Hospital**

1. Each client shall be approved for admission to a State Hospital by the County LTC manager. The County LTC manager reviews and exhausts all possible alternatives with UBH Medical Director and LTC Coordinator prior to authorizing state hospital placement.
2. Upon approval, the LTC Coordinator at UBH sends the current information provided by the hospital and case manager to Metropolitan State Hospital Attn: Admission Coordinator
3. Once the State Hospital has accepted the client, the County case manager/conservatorship designee shall ensure that all legal documents and paperwork are in order enabling transportation and admission to State Hospital.
  - a) Certification must be obtained from the County LTC manager, that funds are available to support the placement by his or her signature on the "Short/Doyle" form.
  - b) Current Letters and Orders of Conservatorship must be obtained from the Conservator
  - c) Authorization must be obtained for the County to provide case management services if conservator is a private conservator.
  - d) The case manager shall notify the facility and the UBH LTC Coordinator of the discharge and transportation date and time.
  - e) The referring facility is responsible for arranging for transportation to the State Hospital and shall have the client and the client's belongings ready to go with the client.

**V. TREATMENT PLANNING**

A. Each person shall have an individualized treatment plan formulated within fourteen (14) days after admission, based on professional assessments by a multidisciplinary treatment team. Prior treatment history shall be integrated into the treatment planning. The treatment plan addresses issues and problems of the individual, but should be strength based. Treatment plans ensure services consistent with the needs and preferences of the person served and are responsive to their diversity needs (e.g., culture, religion, age, gender, sexual orientation, etc.). Each of the treatment programs and facilities vary in their design for specific services, however the treatment goal examples listed below are common for all patients in the SF/LTC program.

**B. Treatment Goals:**

1. Stabilize psychiatric symptoms and prevent regression.
2. Actively support and teach adaptive behaviors and effective coping skills that should improve the quality of life and facilitate eventual return to the community
3. Eliminate or reduce maladaptive behaviors

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4. Develop therapeutic interventions that will enable the persons served to remain in the community for significantly longer periods
5. Increase the client's involvement and participation in the psychosocial rehabilitation and recovery process.
6. Discharge Planning – the LTC program is committed to community reintegration of those with serious and persistent mental illness. Proactive measures (as listed below) shall be taken prior to discharge.
  - a) familiarize client with outpatient programs and personnel and provide date and time of scheduled appointment to client.
  - b) familiarize client with placement facility and facility staff through pre-placement visits.
  - c) refer to assertive community treatment (ACT) 60 days prior to discharge or document why referral was not made.

C. Treatment plans shall be reviewed and updated at each facility, and with the client's conservator/case manager on a quarterly basis

**VI. AUTHORIZATION FOR CONTINUED STAY AT SF/LTC FACILITY**

- A. SF/LTC programs shall submit quarterly reports to the UBH LTC Coordinator that include written documentation of:
1. current diagnosis
  2. medications and compliance
  3. treatment goals and progress
  4. discharge plan and progress towards discharge
  5. level of participation in programming offered by the facility
  6. significant events including seclusion, restraints and harm or threats to self and others
- B. UBH LTC Coordinator or designee reviews the reports to determine the need for continued care, monitor progress in treatment, note significant events, and other pertinent information on each client placed in SF/LTC facilities based on criteria listed below.
- C. Criteria for Continued Stay in an SF/LTC Facility:
1. The client must continue on LPS Conservatorship or have a written waiver of the need for LPS Conservatorship from the County LTC manager.

AND:

2. One of the following criteria must be met:
  - a) Continued symptoms that meet the eligibility criteria to an SF/LTC facility, Vista Knoll or State Hospital.
  - b) Presence of new symptoms that meet eligibility criteria to an SF/LTC facility, Vista Knoll or State Hospital.
  - c) Need for continued evaluation or treatment that can only be provided if the client remains in an SF/LTC facility, Vista Knoll or State Hospital.

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- d) Description of barriers to discharge and documentation of how the barriers are being actively addressed.

D. Utilization Review Process for clients at SF/LTC facilities In and Out-of-County

1. UBH LTC Coordinator reviews the documentation and determines if the criteria for continued stay is met.
2. If Criteria for Continued Stay are met, authorizations are approved for up to ninety days.
3. Clients may be evaluated by UBH or County staff to obtain additional information in order to determine eligibility for Continued Stay.
4. For clients placed in Out-of-County facilities or State Hospital, documentation is provided to the conservator/case manager who then provides appropriate information to UBH LTC Coordinator.
5. During the period authorized, the SF/LTC facility is responsible for reporting any extraordinary events or changes in legal or medical status to UBH.

VII. SF/LTC CONTINUED AUTHORIZATION CRITERIA NOT MET

- A. If the criteria for continued authorization in a SF/LTC program are not met, UBH shall provide an authorization of at least thirty days in order to give the facility proper notice and to facilitate discharge planning. The “Notice of SF/LTC Continued Authorization Criteria Not Met” (see Attachment) shall include:
1. Last date that payment will be authorized
  2. Information regarding requesting a review of the decision.
- B. If the SF/LTC program does not agree with the decision regarding continued authorization, the attending M.D., the conservator/client, or the facility may request a review of the decision.
1. The facility must notify the County LTC manager by at least twenty (20) days prior to the last date of authorized payment and
    - a) shall complete the “Request for Long-Term Care Review” form (see Attachment).
    - b) shall provide supporting documentation as relevant.
- C. The County LTC manager shall review the information and render a decision regarding continued authorization at a SF/LTC program.
1. When a decision is rendered that supports UBH’s determination that decision is final
  2. When a decision is rendered that allows additional payment authorization for a client’s continued stay at a SF/LTC facility, the County LTC manager informs the

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facility if additional information and documentation are required and a due date for that information to be provided.

3. The SF/LTC facility must provide the requested information by the due date in order to continue to receive payment.

VIII. Discharge from SF/LTC Facility

A. For discharge to the community the following criteria must be met

1. The client no longer meets all of the criteria for admission and continued stay in an SF/LTC program.
2. A discharge plan has been developed.
3. The facility has included the conservator/case manager in the planning and the conservator/case manager agrees with the discharge plan.
4. The SF/LTC facility is responsible for informing UBH and the conservator/case manager when the discharge has occurred.
5. When a client meets criteria for discharge from an Out-of-County SF/LTC program to a lower level of care, the conservator/case manager arranges admission and transportation to an appropriate lower level of care. The Out-of-County case manager is responsible for informing UBH of the discharge.

B. Discharge from SF/LTC program to a higher level of care (e.g., acute hospitalization State Hospital), the following criteria must be met:

1. The client is unable to be treated at the SF/LTC level of care due to the severity of symptoms.
2. The client must meet admission criteria to the higher level of care.
3. The SF/LTC program arranges admission and transportation to an acute hospital and notifies UBH, the conservator and the case manager. State hospital admissions must first be authorized by the County LTC manager.
4. Out-of-County SF/LTC programs notify the case manager who in turn notifies UBH.

C. SF/LTC Bed Holds during acute hospitalizations

1. When a SF/LTC client's symptoms escalate to the point he/she cannot be managed at this level of care, and requires treatment in an acute psychiatric inpatient facility, the client shall be allowed a seven-day bed hold. A seven-day

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bed hold will also be instituted should a client need a brief stay in an acute medical inpatient facility for physical health needs.

2. Clients whose acute psychiatric stay are funded by Medi-Cal must be admitted to San Diego County Psychiatric Hospital as Medi-Cal can not be billed by the private hospital during an IMD/MHRC 7 day bed hold per Federal Regulations.
3. Out-of-County IMDs must transfer clients in need of acute care to an “out of network” hospital that is contracted for payment with San Diego County dollars.
4. The UBH Medical Director may authorize an extension of the seven days bed hold provided the following criteria are met:
  - a) Client is expected to be able to return to the IMD level of care after acute hospital stay.
  - b) The IMD facility is expected to be able to meet the client needs.
  - c) Client is expected to be ready to return to IMD level of care within a reasonable amount of time.

**ATTACHMENT(S):** Secure Facilities/Long-Term Care Referral Form  
Secure Facility/Long-Term Care Notice To Client/Representative Payee  
Therapeutic Behavioral Services Certification Form  
UBH SF/LTC Letter of Determination  
UBH SF/LTC Letter to Client  
Notice of Continued Authorization Criteria Not Met  
Request For Review Of Notice That SF/LTC Continued Authorization Criteria Not Met

**SUNSET DATE:**

This policy shall be reviewed for continuance on or before October 31, 2009.